


PROVIDER BULLETIN

No. 14-12

DATE: March 5, 2014

TO: All Providers Participating in the Nebraska Medicaid Program

FROM: Vivianne M. Chaumont, Director 
Division of Medicaid & Long-Term Care

BY: Bob Kane, Administrator
Medicaid Claims Unit
Division of Medicaid & Long-Term Care

RE: Billing Instructions Updated – CMS 1500 and CMS 1450 (UB04)

Please share this information with Administrative, Clinical, Coding, Billing, and IT Staff

This is an informational bulletin concerning the update of billing instructions for the following health insurance claim forms.

- Revised CMS 1500 Health Insurance Claim Form / Version 02/12
- CMS 1450 (UB-04) Health Insurance Claim Form

Revised CMS 1500 / Version 02/12:

Effective April 1, 2014, use of the Revised CMS 1500 Claim Form (version 02/12) is mandatory. See [Provider Bulletin #13-75](#), issued November 14, 2013, for details of the implementation plan. Please note:

- Paper claims submitted on older versions on or after April 1, 2014, will be returned to the provider.
- Hardcopy billing providers currently using older versions of the CMS claim form should acquire the CMS 1500 (02/12) claim form as soon as possible.
- Providers who are using practice management software with older versions of the hardcopy claim forms should continue working with their software vendor on the necessary updates.
- Providers who submit claims electronically should continue working with their clearinghouses on the 1500-837P crosswalk.

The posted example of the CMS 1500 Claim Form has also been updated to include both the new version 02/12, required as of April 1, 2014, and the current version (08/05) which will be accepted ONLY through March 31, 2014. The example forms are located at: <http://dhhs.ne.gov/Documents/471-000-58.pdf>

Revised billing instructions for the Revised CMS 1500 Claim Form / Version 02/12 are now on the Nebraska Medicaid web site. Please review the changes for the services listed below at: http://dhhs.ne.gov/Pages/reg_appx_atc471.aspx

- 471-000-53 Ambulance Services
- 471-000-54 Chiropractic Services
- 471-000-55 DME, Medical Supplies, Orthotics and Prosthetics (DMEPOS)
- 471-000-56 Hearing Aid Services
- 471-000-61 Physical Therapy, Speech Pathology and Audiology, and Occupational Therapy Services
- 471-000-62 Physician, Laboratory and Ambulatory Surgical Center (ACS) Services
- 471-000-63 Podiatry Services
- 471-000-64 Mental Health and Substance Abuse Services
- 471-000-65 Visual Care Services

All related Provider Handbooks have also been updated to include these revisions. Handbooks can be reviewed at:
http://dhhs.ne.gov/medicaid/Pages/med_ph.aspx

CMS 1450 (UB-04):

Revised billing instructions for the CMS 1450 (UB04) Claim Form are now on the Nebraska Medicaid web site. Please review the changes for the services listed below at: http://dhhs.ne.gov/Pages/reg_appx_atc471.aspx

- 471-000-57 Home Health Agency Services
- 471-000-71 Nursing Facility, ICF/MR, Assisted Living-Waiver, Hospital Swing Bed, and Hospice in Nursing Facility or ICD/MR (ICF/ID) Services
- 471-000-76 Federally Qualified Health Center Services
- 471-000-77 Rural Health Clinic Services
- 471-000-80 Durable Medical Equipment (DME) submitted by Nursing Facilities and Intermediate Care Facilities
- 471-000-81 Hospice Services
- 471-000-83 Hospital Services

To receive emailed notification of Recent Web Updates, subscribe at:
http://dhhs.ne.gov/medicaid/Pages/med_updates.aspx

For specific questions regarding billing instructions, please contact the Medicaid Inquiry Line at 877-255-3092 (toll free) or 402-471-9128 (local).

For any concerns regarding this bulletin, please contact Bob Kane at bob.kane@nebraska.gov or 402-471-9382.